

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

**10/523 830**

FILING DATE

APPLICANT(S)

**3-16-05 CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
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48						
49						
50						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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97						
98						
99						
100						
TOTAL IND.		↓	4	↓		↓
TOTAL DEP.		←	44	←		←
TOTAL CLAIMS			48			

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/523 870

2 of 2  
FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101						1
102						1
103						1
104						1
105						1
106						1
107						1
108						1
109						1
110						1
111						1
112						1
113						1
114						1
115						1
116						1
117						1
118						1
119						1
120						1
121						1
122						1
123						1
124						1
125						1
126						1
127						1
128						1
129						1
130						1
131						1
132						1
133						1
134						1
135						1
136					1	
137						1
138						1
139						1
140						1
141						1
142						1
143						1
144						1
145						1
146						1
147						1
148						1
149						1
150						1
TOTAL IND.		↓		↓	3	↓
TOTAL DEP.		←		←	44	←
TOTAL CLAIMS					47	

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
151						
152						
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200						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						